waste management method that is available to me and that I can	offord.	-		
Printed/Typed Name A	Signature 7	Month	Day	Year
JOHN MARAS-0	Bolly Il want	1121	/ /	Sp. /
17. Transporter 1 Acknowledgement of Receipt of Materials	have III	1 3 1 1		1 1 1 1 1 1 1
Printed/Typed Name	Signature / /	Month	, Day ,	Хеаг
Thomas 1 LESSIG	Thomas Palleda	/ 21	/1/	K1 1
18. Transporter 2 Acknowledgement of Receipt of Materials		7 15/17		1 2 1 2
Printed/Typed Name	Signature	Month	Day	Year
10 P			ĺ	1 1
19. Discrepancy Indication Space				•
				1
				1

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Month Day

DO NOT WRITE BELOW THIS LINE.

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